

COUNTY COUNCIL OF DUNBARTON



Annual Report
on the
Medical Inspection of
School Children

By SAMUEL HARVEY,
M.B., Ch.B., D.P.H., M.R.C.P. (Edin.)
Medical Officer of Health

1958-1959
(Year ending 31st July, 1959)

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*To the Department of Health for Scotland and the County Council
of the County of Dunbarton.*

LADIES AND GENTLEMEN,

I beg to submit the Annual Report on the Medical Inspection
and Treatment of School Children for the year ended 31st July, 1959.

I am, Ladies and Gentlemen,

Your obedient servant,

SAMUEL HARVEY,
Medical Officer of Health.

COUNTY HEALTH DEPARTMENT,
88 COLLEGE STREET,
DUMBARTON.

COUNTY COUNCIL OF DUNBARTON.

SCHOOL MEDICAL STAFF.

Supervising School Medical Officer

SAMUEL HARVEY, M.B., Ch.B., D.P.H., M.R.C.P.(Edin.).

School Medical Officers

IAIN MACLEOD, M.B., Ch.B., D.P.H.

CHARLES C. SLORACH, M.B., Ch.B., D.P.H. (part-time).

AGNES W. B. F. O'GORMAN, L.R.C.P., L.R.C.S.(Edin.),
L.R.F.P.S.(Glas.), D.P.H.

HARRY C. T. SMITH, M.B., Ch.B., D.P.H.

JEAN A. EADIE, M.B., Ch.B. (part-time).

Chief Dental Officer

FELIX A. CASSIDY, L.D.S., D.D.S.(McGill).

Dental Surgeons

ELIZ. McKENDRICK, L.D.S.

(Res. 16.2.59).

MARY W. DINN, L.D.S.

RICHARD DOCHERTY, L.D.S.

THEA MacGREGOR, M.B.,
Ch.B., B.D.S. (Comm. 16.8.58).

STANLEY W. BUNTING, L.D.S.

JAMES H. FERGUSON, L.D.S.

HELEN M. GALE, B.D.S.

(Res. 15.8.59).

THOMAS T. MEEK, L.D.S.

ANNE G. JACKMAN, L.D.S.

MARTYN L. H. DAVIS, L.D.S.

Senior Dental Technician

JAMES FYFE.

Dental Technician

ALEX. M. TORRANCE.

Ophthalmic Surgeon

JAMES M. TENNENT, M.B., Ch.B., B.Sc., D.O.M.S., F.R.F.P.S.

Ear, Nose and Throat Specialist

W. GOUDIELOCK HOOD, M.B., Ch.B., F.R.F.P.S.

Anæsthetists

A. FERGUS McINTYRE, M.B., Ch.B.

H. P. COOPER HARRISON, M.B., Ch.B.

Superintendent Physiotherapist

MORAG T. GALLOWAY.

Physiotherapists

AGNES McF. MALCOLM. ELIZABETH M. Y. McNICOL.
JEAN S. A. HOWATT.

Superintendent of Nurses

CATHERINE T. GAVIN.

Nursing Staff

ELEANOR I. CHRISTIE.	WILLIAMINA CAFFEL.
KATHERINE S. STEVENSON.	J. McLAFFERTY.
ALICE GEE.	ELSIE M. RANKIN.
MARGARET W. CHRISTIE.	JEAN P. McHAFFIE.
AGNES C. JOHNSTON.	ELIZABETH T. CRAWFORD.
CHRISTINA S. L. KING.	ELIZABETH A. SANDILANDS.
MARGARET CALLANDER.	MARGT. M. MACDONALD.
MARGARET G. MILLER.	CATHERINE DEMPSEY.
MARY CALLAGHAN.	ANNIE MOORE.
CATHERINE M. SCOBIE.	EMMA B. SMITH.
R. L. SHAW.	C. FOWLER.
ANNIE OFFICER.	

Audiometrician

CHRISTINA P. ROGERS.

Orthoptist

WINIFRED M. McALISTER.

Orthoptic Attendant

MARY B. GUTHRIE.

Dental Attendants

ANNIE J. RAE.	MARY C. McKENZIE
ANN McL. CAMERON.	(Comm. 1.9.58).
MARGARET SAMSON.	MARGARET MAGUIRE
MARJORIE E. P. GARDNER.	(Comm. 20.10.58).
MARTHA W. KINLOCH.	EDITH H. NOBLE
MARGARET BOYLE.	(Comm. 26.12.58).

Orthopædic Clinic Attendant

MARGARET C. BLACK.

Clerks

ELIZABETH A. McLEAN.	ELIZABETH MACFARLANE.
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REPORT

ON THE

MEDICAL INSPECTION AND TREATMENT OF SCHOOL CHILDREN IN THE COUNTY OF DUNBARTON.

1.—LIST OF STAFF.
(See pages 4 and 5.)

2.—(a) NUMBER OF SCHOOLS.

School Management Area—

Cumbernauld	...	...	...	...	...	4
Kirkintilloch	...	...	...	...	...	8
New Kilpatrick	...	...	...	...	...	6
Old Kilpatrick	...	...	...	...	...	18
Dumbarton ...	...	...	...	...	...	7
Vale of Leven	...	...	...	...	...	13
Helensburgh	...	...	...	...	...	10
						<hr/> 66 <hr/>

(b) NUMBER OF CHILDREN ON REGISTER AND IN AVERAGE ATTENDANCE DURING SESSION 1958/59.

<i>School Management Area.</i>	<i>Average on Roll.</i>	<i>Average Attending.</i>	<i>Per Cent.</i>
Cumbernauld	936.6	862.3	92.1
Kirkintilloch	4396.4	4019.3	91.4
New Kilpatrick	2737.5	2564.4	93.7
Old Kilpatrick	10445.5	9541.4	91.3
Dumbarton	5772.2	5209.0	90.2
Vale of Leven	4077.8	3727.3	91.4
Helensburgh	2148.8	1975.2	91.9
Total	<hr/> 30514.8 <hr/>	<hr/> 27898.9 <hr/>	<hr/> 91.0 <hr/>

NUMBER OF VISITS FOR SYSTEMATIC EXAMINATIONS.

Note.—One whole day spent in school counts as two visits.
(morning and afternoon sessions).

1. Number of visits as above

325

NUMBER OF SPECIAL VISITS BY MEDICAL OFFICERS.

2.	For examination of backward, mentally or physically defective children	42
3.	For re-examination of defective children	39
4.	Attendances at school clinics	222
5.	Attendances for office work, etc.	12
6.	For inquiry regarding infectious diseases (including scabies)	1
7.	Diphtheria immunisation	24
8.	Others	133
		<hr/> 473 <hr/>

SANITARY CONDITIONS OF SCHOOLS.

The Property Committee, when making their annual inspection of schools and other properties in the spring of 1958, examined the lavatories, particularly at the older buildings, and expressed satisfaction with the manner in which these offices were being maintained and cleaned.

During the summer vacation all broken or defective sanitary fittings were replaced and the usual limewashing and painter work was carried out, where necessary, in all toilet apartments, heating chambers, playsheds, etc.

The major renovation of the girls' toilets at Dumbarton Academy was completed and the new playsheds and toilets at Dalmuir Secondary School are almost finished and ready for use.

The Committee approved a very extensive programme of internal redecoration at schools throughout the county and a considerable amount of washing down work was done.

ORGANISATION AND ADMINISTRATION.

For Organisation and Administration, etc., and Co-operation with Public Health Department, Sections A, B, C, D, E and F, see pages 9 to 15 of the Annual Report, 1948-49.

PARENTS PRESENT AT INSPECTION.

<i>School Management Area.</i>	<i>No. of Children Examined.</i>	<i>No. of Parents Present at Routine Examinations.</i>	<i>Per Cent.</i>
Cumbernauld	282	154	54.6
Kirkintilloch	1212	506	41.7
New Kilpatrick	777	442	56.8
Old Kilpatrick	2540	1180	46.4
Dumbarton	1587	606	38.2
Vale of Leven	619	383	61.8
Helensburgh	515	154	29.9
Total	<hr/> 7532 <hr/>	<hr/> 3425 <hr/>	<hr/> 45.5 <hr/>

GENERAL REVIEW.

Routine inspection was carried out on 7532 children—a decrease of 461 from last year's total.

The number of children examined non-routinely, i.e., at clinics mainly, was 1885.

Three thousand four hundred and twenty-five parents were present at the routine examinations.

PHYSICAL CONDITION.

The percentage of children found to be free from all defects on routine school examination was 61.27, as against the previous session's figure of 61.5. The percentage of children free from defects in the different age groups was as follows:—

Entrants	...	...	...	...	...	59.96
Second Age Group	...	...	...	...	...	64.09
Third Age Group	...	...	...	...	...	59.79
Fourth Age Group	...	...	...	...	...	58.76

In Table I the number of children who were found to be requiring treatment (excluding uncleanliness and dental caries) and whose parents were so advised was 333, 96 less than last session.

77.82 per cent. of the children examined had already been immunised against diphtheria.

DEFECTS AND DISEASES.

Clothing.—During the session 2 children were found to have unsatisfactory clothing.

Footgear.—Two cases of unsatisfactory footgear were noted.

Uncleanliness.—The percentage of children found to be in a verminous condition of head and/or body shows no increase from 1957-58—3.1 per cent. 2.6 per cent. of girls examined were in this category as against 0.5 per cent. of the boys.

Skin Diseases.—Two cases of impetigo of the head were found, a decrease from last year's total.

Nutrition.—Two children were noted as suffering from bad nutrition. This is an increase of 1 from last year.

In the special eye examination of the 1951 age group, 89.3 per cent. had normal vision.

SCHOOL DENTAL SERVICE.

ANNUAL REPORT, 1958-59.

The statistical record for the school session 1958-59 will be found on page 19 under Table V.

A table under the heading "Additional Information" is shown on page 16 and gives some indication of the extent of treatment offered and carried out.

In February, one of the pioneers of the County's Dental Service, Miss E. McKendrick, L.D.S., retired, having completed 39 years of good service.

We were unable to fill this vacancy prior to the end of the session, thus the staff during the year was equivalent to the services of 9½ Dental Officers. The total establishment is 13 Dental Officers.

Of the 23,196 attendances made at the clinics for treatment, 3291 (16 per cent.) were made by expectant or nursing mothers and pre-school children. It is apparent that the inroads of the Priority Classes into the School Dental Service are considerable.

Throughout the County, in varying degrees, school children, of their own volition, return at regular intervals (usually every six months) for a dental check up followed by treatment if necessary. Since they are not referred for treatment as the result of the Annual Routine Dental Inspection carried out in the schools, they are regarded as emergency cases. This gives rise to an inflated record of emergency patients and a false picture of the true conditions. Emergency patients are usually associated with toothache, whereas these patients are in the main seeking treatment for the conservation of their teeth and not for extractions for the relief of pain. The fact that some 5000 fillings were recorded under emergency patients is a true indication of this.

Advances in dental technique over the past 20 years have done much to diminish the dread of dental treatment, but nevertheless there still remains a reluctance on the part of many people to submit to conservation of the teeth by means of fillings. This is understandable, for the vibrations of the dental bur upon the tooth are not pleasant. Anything, therefore, which can remove this unpleasantness and so lead to greater conservation and less extraction of teeth is good dentistry. For this reason a Dentalair unit similar to that mentioned in my last Annual Report was installed in one of the clinics on a trial basis. This machine, unlike the conventional dental engine, has no pulleys or belt drive, but is motivated by compressed air, thus eliminating all vibrations. In addition, its high speed of operation reduces considerably the time taken for what was formerly regarded as the unpleasant phase of tooth conservation. We found that children who had experienced both types of dental machine, with a few exceptions, expressed a preference for the compressed air type.

Conservation of the permanent molars, especially the six-year-old molars (first permanent molars) occupies the major portion of a school dental officer's time, and I am of the opinion that it is in this field that such machines will play their greatest part in children's dentistry, and in so doing create a willingness to accept conservative dental treatment in later life.

F. A. CASSIDY.

DEPARTMENT OF SPEECH THERAPY AND SPEECH TRAINING.

ANNUAL REPORT, 1958-59.

When, in February last, I joined the staff of Dunbarton County Council Education Committee to take charge of this department, I found the work in both therapy and training proceeding smoothly, and highly commended by all concerned. There is no doubt that the joining of the two into one department, with very close co-operation between them, should have beneficial results. If a scheme of Speech Training can be established in the early years of the Infants and Primary Schools, which will aim at training children in good habits of nasal and oral hygiene and correct beginnings of speech, the incidence of superficial dislalia (tongue disorders of articulation) should be reduced to some extent and relieve the waiting lists for therapy. The therapists would then be able to cope with a greater number of the more difficult and persisting organic and neurological defects, of which there are many requiring treatment. On the other hand, ideal facilities for the rehabilitation of the child who has had treatment are provided by the speech training classes and speech and drama projects within the schools. In these they would be given both opportunity and encouragement in the use of the newly-acquired skill, and in the gaining of confidence.

Unfortunately, the Speech Training staff has become much depleted and, at present, consists of only two full-time teachers, and myself teaching part-time. (At the end of June we part with Miss Fiona Peterkin, whose work was highly thought of in the schools, and she takes with her the good wishes of her colleagues.) It is the intention, however, to try to operate these schemes in as many of the schools as can be visited by the existing staff and such additional teachers as may be appointed. A similar department was set up in the city of Aberdeen some 17 years ago and has proved to be very beneficial indeed. The number of children in that city is comparable with those in this County, i.e., 30,000 approximately. When I visited it in March of this year the department consisted of 10 Speech Therapists and 12 Teachers of Speech Training and the Superintendent.

From Christmas onwards our department was short of two therapists, Miss Dallas and Miss Black, who left to take up appointments elsewhere. Two regional clinics were set up by me in February, one for the area of Dumbarton at Moss Cottage Educational Centre, and one at Kilbowie Primary School (where accommodation is provided) for the area of Clydebank. Cases most urgently in need of attention, medical referrals, post-operational, etc., were admitted, and an effort was made to make up in some measure for the loss of the service in 10 of the schools. A few more were seen and treated than was at first thought possible because of the fact that in the last term some of the final Diploma students from the Glasgow School of Speech Therapy had been admitted to our clinics for practical experience in clinical procedure, and assisted me for short periods each week. The practical examinations for four of these students were held in two of our clinics within the new schools of Linnvale and St. Eunan's. They were

chosen because of the very fine accommodation provided in them for this work. The examiners from London, Dr. Morley and Miss Ferrie, were much impressed and commented upon the pleasant rooms and excellent facilities which the Council have provided for the treatment of our children, and expressed a desire to see some of the others. (When we found ourselves in difficulty over accommodation in Helensburgh owing to the alterations in the schools there, the Director kindly sanctioned the use of two of the small rooms in Ardlui House, which will serve as a regional clinic for Clyde Street, St. Joseph's and Hermitage Schools. Cases are also admitted there from the outlying districts of Rhu and Kilcreggan.) We were fortunate in securing the services of two of the students who qualified, to fill the vacancies in our therapy staff at the beginning of the new session. It is with regret that we part with Miss Boyle, who did much good work on the therapy side. She resigned from our staff in June to take an appointment at the Hospital for Sick Children. We wish her every success in the work.

I would mention at this point that I had requests from the hospitals to deal with two adult patients. One woman resides in the outlying district of Twechar and has three small children in attendance at the school there. It was very difficult for her to attend at Stobhill Hospital for her post-operational treatment, and I was asked whether we had a therapist visiting in that area. The other was a lady from Helensburgh upon whom the surgeon decided not to operate, but advised her to have a course of speech therapy treatment. She has a pre-school child. I would suggest very earnestly that such adults be seen by our therapists (there would only be a few such cases each year) for two reasons: (a) we wish to establish close liaison with the hospitals so that our children may have the full benefit of access to specialists for medical examination and surgery when required; (b) our therapists will grow in stature in their profession, having experience in all types of speech disorders, and will be more likely to remain with our department for longer periods. They are inclined to go on to hospitals for this very experience. At present the shortage of qualified Speech Therapists is acute. In these circumstances, I have wondered whether the Committee might consider the appointment of married women as assistants on a strictly temporary basis.

The work has been carried out as formerly, cases being treated individually or in small groups according to their needs. Much valuable assistance is given in the schools by headmasters and their staffs. A special word of thanks is due to the headmasters of Linnvale and St. Eunan's for the extra help so willingly given during the Diploma examinations. Valuable guidance is also given to us by the Director of Education, by Dr. Anne H. McAllister, in her capacity as Honorary Consultant, and by Miss Calvert, Principal Psychologist. The County Medical Officer and entire medical and nursing staff co-operate to the fullest extent in making centres available and suitable for Speech Therapy treatment, and in giving advice when required. The results have been very satisfactory indeed, especially in regard to the pre-school child. The numbers continued next session (see Table of statistics appended) would have been further reduced had the full

staff been operating. The numbers on List B (all examined, but awaiting treatment) are obtained from the survey, which was carried out some years ago, and has since been kept up to date. By courtesy of the Council, leave has been granted to one of the assistant therapists and myself to attend the International Conference on Speech Disorders which will be held in London from 17th to 22nd August.

During the past session the following schools had the benefit of the teachers of Speech Training: Clydebank High School, Bearsden Primary, Goldenhill, Hartfield, Elgin Street, Milngavie, Whitecrook, Dalreoch, Knoxland, St. Eunan's, Kilbowie, Gavinburn, St. Patrick's R.C. Primary, St. Stephen's and Faifley Primary, making 15 schools in all. This work was commended by both headmasters and teachers. It has been requested by others who do not have it. Only one secondary school was visited. While it is of the utmost importance to have this service in the early years, until a great deal more of it can be done, it would be extremely beneficial for those who are leaving school and going out to their various careers. It is proposed, however, to continue in the schools which have had this service with the age groups not yet covered to establish some continuity in the work and thereby obtain the best results. Eleven schools only can be visited in the coming session by the existing staff, but as others are appointed they will be directed to those schools which have the greatest need of it.

In conclusion, I would thank the Director and staff for their very warm welcome.

N. M. MAXWELL,

*Principal Therapist and in charge of the
Department of Speech Therapy and
Speech Training.*

SPECIAL SCHOOLS AND CLASSES.

SPECIAL SCHOOLS.

Milton Special School.

This school caters for mentally handicapped pupils from the Western portion of the County. There are four classes at Milton School with a total roll of 85. There is also an Occupational Centre at Gavinburn with 53 pupils on the roll.

SPECIAL CLASSES.

- (a) For mentally handicapped children—*Whitecrook School, Clydebank*, with 17 on the roll (one class); *Lairdsland School, Kirkintilloch*, with 28 on the roll (two classes). Total number of pupils—45.
- (b) For physically handicapped children—*Hartfield School, Dumbarton*, with 20 on the roll (one class).

- (c) For conservation of vision—*Whitecrook School, Clydebank*, with 7 on the roll (one class); *Hartfield School, Dumbarton*, with 7 on the roll (one class). Total number of pupils—14.
- (d) For deaf-mute children—*Hartfield School, Dumbarton*, with 9 on the roll (one class).

INSTITUTIONS.

(1) Number of physically handicapped children in Institutions paid for by the County Council - - - - -	11
(2) Number of mentally handicapped children in Institutions paid for by the County Council - - - - -	5
(3) Number of Blind Persons in training under the Blind Persons Act, 1920 (cost of training borne by the County Council and maintenance by the Local Authority) - - - - -	3

REMOVAL OF TONSILS AND/OR ADENOIDS.

During the year 576 children were operated on for the removal of Tonsils and/or Adenoids. There still remained at the end of the year 275 children awaiting examination.

This is an increase in the number of operations, 576 as against 539 last year.

MEDICAL INSPECTION OF SPECIAL SCHOOLS.

During the present session 133 children, 62 boys and 71 girls, were examined. Of these, 86 were found to be mentally defective (educable) and 47 mentally defective (ineducable), while 10 had a congenital deformity. Clothing and footgear were satisfactory in all cases, 19 children were found to have a verminous condition of the head and/or body, and 14 children were found to have unhealthy mouths. 33 parents were present at the medical examinations and notices were issued to all parents whose children were found to be suffering from a particular defect.

MILK-IN-SCHOOLS SCHEME.

The average number of pupils taking milk in schools during Session 1958-59 was 339,927 (approximately 86 per cent. of the roll).

ARRANGEMENTS FOR PHYSICAL EDUCATION AND PERSONAL HYGIENE IN SCHOOL.

Details of physical education arrangements are as contained in the Report for 1948-49.

ADMISSION OF CHILDREN TO APPROVED SCHOOLS.

During the year 23 children were committed by the Sheriff to Approved Schools.

ULTRA VIOLET LIGHT TREATMENT.

The following are details of the work done at Dumbarton, Clyde-

bank, Kirkintilloch, Bearsden, Alexandria and Helensburgh Clinics during the year:—

Number of patients treated ...	...	...	134
Total number of attendances ...	...	...	2106
Average number of treatments ...	...	...	16

<i>Cause of Reference.</i>	<i>No. of Patients.</i>	<i>No. Improved.</i>	<i>Condition Unchanged.</i>
Bronchitis, etc. ...	46	33	13
Debility ...	57	41	16
Skin conditions ...	1	1	—
Others ..	30	27	3
Totals ...	134	102	32

TABLE I.

Total number of children examined at:—

(a) *Ordinary Schools*—

	<i>Systematic Examinations.</i>	<i>Other Systematic Examinations.</i>
Entrants ...	2663	—
Second Age Group ...	2551	—
Third Age Group ...	2027	1885

Secondary Schools—

Fourth Age Group ...	291	—
Totals ...	7532	1885

(b) *Other Examinations*—

Special cases ...	...	42
Re-inspection by Medical Officer ...	...	39
Total ...	...	81

Number of individual children inspected at systematic examinations who were notified to parents as requiring treatment (excluding uncleanliness and Dental Caries):—

Entrants ...	95
Second Age Group ...	109
Third Age Group ...	115
Secondary Age Group ...	14
Other systematic examinations ...	—
Total ...	333

SCHOOL DENTAL SERVICE.

SESSION 1958-59.

ADDITIONAL INFORMATION.

Number of Full Upper or Full Lower Dentures	6
„ „ Partial Upper or Partial Lower Dentures	89
„ „ Inlays	77
„ „ Acrylic Jacket Crowns	12
„ „ Post Crowns	10
„ „ Root Filled teeth	41
„ „ X-rays taken	158
„ „ Partial Pulpotomies	12

ORTHODONTIC TREATMENT.

1. No. of children given Orthodontic treatment—	
(a) By School Dental Officer	257
(b) No. of these treated in consultation with the Chief Dental Officer	68
2. Cases treated by the School Dental Officer—	
No. of cases continuing from previous year	97
3. No. of new cases this session	121
4. No. of completed cases	57
5. No. of cases continuing at end of year	115
6. No. of attendances for treatment	1918

Details of Treatment.

7. No. of impressions taken	440
8. No. of appliances fitted	164
9. No. of extractions for Orthodontic purposes—	
Permanent	—
Temporary	—
10. No. of X-rays taken for Orthodontic purposes	62
11. No. of cases discontinued	37

F. A. CASSIDY,
Chief Dental Officer.

TABLE II—SYSTEMATIC EXAMINATIONS
TOTAL EXAMINED AT ALL AGES—1982

[illegible]

TABLE III.—SYSTEMATICAL MEDICAL EXAMINATION

Classification	Entrants		Second Age-Group		Third Age-Group		Fourth Age-Group		Total	
	Number of Children	Percentage of the Children Examined in this Group	Number of Children	Percentage of the Children Examined in this Group	Number of Children	Percentage of the Children Examined in this Group	Number of Children	Percentage of the Children Examined in this Group	Number of Children	Percentage of the Children Examined at Systematic Medical Examinations
I.—Children free from Defects	1597	59.96	1635	64.09	1212	59.79	171	58.76	4615	61.27
II.—Children (otherwise free from defects) who suffer from—										
(a) Defective vision not worse than 6/12 in the better eye with or without glasses	31	1.16	119	4.66	135	6.66	46	15.80	331	4.39
(b) Conditions of the Mouth and Teeth requiring treatment	128	4.80	207	8.11	301	14.84	20	6.08	656	8.70
(c) Both (a) and (b)	3	0.11	19	0.74	25	1.23	3	1.03	50	0.67
Total	162	6.08	345	13.52	461	22.74	69	23.71	1037	13.76
III.—Children suffering from Ailments (other than those mentioned in II) from which complete recovery is expected within a few weeks	815	30.60	440	17.24	268	13.22	42	14.43	1565	20.77
IV.—Children suffering from (or suspected to be suffering from) defect less remediable than defects specified in II and III, distinguishing cases—										
(a) Where complete cure or restoration of function (in the case of eye defects full correction) is considered possible	82	3.07	108	4.23	71	3.50	8	2.74	269	3.57
(b) Where improvement only is considered possible, e.g., without complete restoration of function	7	0.26	23	0.90	15	0.74	1	0.34	46	0.61
Total	89	3.34	131	5.13	86	4.24	9	3.09	315	4.18
Total Number of Children Examined	2663	—	2551	—	2027	—	291	—	7532	—

TABLE IV.
RETURN OF ALL EXCEPTIONAL CHILDREN OF SCHOOL AGE IN THIS AREA

Disability		At Ordinary School	At Special Schools or Classes	At No School or Institutions	Total
1. Blind	.....	—	1	3	4
2. Partially Sighted— (a) Refractive errors in which the curriculum of an ordinary school would adversely affect the eye condition (b) Other conditions of the eye, e.g., cataract, ulceration, etc., which render the child unable to read ordinary school books or to see well enough to be taught in an ordinary school	..... ..... .....	— — —	15 2 —	— — —	15 2 —
3. Deaf—Grade I Grade IIA Grade IIB Grade IIB	..... ..... ..... .....	52 87 3 —	— — 3 26	— — 3 —	52 87 9 26
4. Defective Speech— (a) Defects of articulation requiring special educational measures (b) Stammering requiring special educational measures	..... ..... .....	7 3 —	1 — —	— — —	8 3 —
5. Mentally Defective (Children between 5 and 16 years)— (a) Educable (I.Q. approx. 50-70) (b) Ineducable (I.Q. generally less than 50)	..... ..... .....	6 — —	131 37 —	4 4 —	141 41 —
6. Epilepsy— (a) Mild and occasional (b) Severe (suitable for care in a residential school)	..... ..... .....	— — —	3 3 —	2 — —	5 3 —
7. Physically Defective (Children between 5 and 16 years)— (a) Non-pulmonary tuberculosis (excluding cervical glands) (b) General orthopaedic conditions (c) Organic heart disease (d) Other causes of ill-health	..... ..... ..... .....	— 2 — —	2 21 3 12	1 — — 6	3 23 3 18
8. Multiple Defects— (a) Mentally defective (educable) and epilepsy (mild) (b) Mentally defective (ineducable) and epilepsy (mild) (c) Mentally defective (educable) and partially sighted (refractive error) (d) Physically defective (other causes of ill-health) and partially sighted (refractive errors)	..... ..... ..... .....	— — — —	— — — —	— — — —	— — — —
Total		160	206	23	449

TABLE V.—DENTAL INSPECTION AND TREATMENT.

(1) Inspected by the Dental Officers:—

Age.				(a) <i>Systematic Examinations.</i>	(b) <i>Special Emergency Cases.</i>	<i>Total.</i>
5	...	...	...	167	297	464
6	...	...	...	389	368	757
7	...	...	...	276	380	656
8	...	...	...	424	423	847
9	...	...	...	729	460	1189
10	...	...	...	963	369	1332
11	...	...	...	964	308	1272
12	...	...	...	84	392	476
13	...	...	...	—	366	366
14	...	...	...	—	583	583
15	...	...	...	—	108	108
15+	...	...	...	—	46	46

				<i>Systematic Examinations.</i>	<i>Special or Emergency Cases.</i>	<i>Total</i>
(2) Found to require treatment				3030	3664	6694
(a) Number accepting treatment	...	...	...	1935	3646	5581
(3) Actually treated by School Dental Officers	...	...		2135	3863	5998
(4) Number of Attendances made by Children for treatment	...	...	...	7755	12150	19905
(5) Fillings—						
(a) Permanent Teeth	...			3560	4822	8382
(b) Temporary Teeth				443	283	726
(6) Extractions—						
(a) Permanent Teeth	...			969	2105	3074
(b) Temporary Teeth	...			1606	4113	5719
(7) Number of Administrations of a general anæsthetic for Extractions	...	...		353	1061	1414
(8) Other Operations—						
(a) Permanent Teeth	...			1553	2891	4444
(b) Temporary Teeth	...			130	188	318
(9) Half-days devoted to—						
(a) Inspection	...	...		72	—	72
(b) Treatment	...	...		1351	1665	3016
(10) Children treated under private arrangements.						No reliable information available.

TABLE VI.
AVERAGE HEIGHTS AND WEIGHTS IN INCHES AND POUNDS

Total Number Examined at All Ages	BOYS											
	Entrants			Age 9			Age 13			Age 16		
	Number Examined	Average Age	Height (Inches)	Weight (Pounds)	Number Examined	Average Age	Height (Inches)	Weight (Pounds)	Number Examined	Average Age	Height (Inches)	Weight (Pounds)
1958-59	1330	5 7	43-9	43-4	1345	9 4	51-0	64-4	1046	13 2	60-0	92-0
1957-58	1391	5 7	43-1	43-8	1379	9 4	50-3	62-9	1161	13 1	59-2	93-3
1956 57	1542	5 7	43-7	46-4	1506	9 5	52-2	66-1	1904	13 7	60-6	95-5
1955-56	1503	5 6	43-7	42-9	1399	9 6	52-1	63-7	1071	13 6	59-7	93-4
1954-55	1552	5 7	45-1	43-6	1159	9 6	52-3	64-3	1006	13 6	59-7	93-2
1953-54	1436	5 6	43-8	43-4	1372	9 6	52-1	64-2	1039	13 5	59-6	92-2
1952-53	1357	5 6	43-1	42-6	1192	9 7	52-0	63-3	923	13 5	59-2	91-2
1951-52	1397	5 5	43-3	42-8	1070	9 7	52-2	62-7	979	13 3	58-9	90-7
1950-51	1215	5 6	43-2	43-1	1088	9 5	50-6	57-8	1011	13 5	58-9	89-0
County Average— Years 1940-41 to 1949-50	11647	5 5	42-8	43-2	10808	8 11	50-0	57-3	10134	13 4	58-9	88-0
County Average— Years 1930-31 to 1939-40	12495	5 6	42-6	41-8	11767	8 8	49-4	56-5	7108	13 7	58-9	89-5
County Average— Years 1919-20 to 1929-30	13238	5 7	42-1	41-2	11863	8 7	48-3	54-3	—	—	—	—

* Previous to the session 1930-31, the average age of the Third Age Group was 12 years. The number of children examined at the average age of 13 years is, therefore, comparatively small.

TABLE VII.

AVERAGE HEIGHTS AND WEIGHTS IN INCHES AND POUNDS—Continued

Total Number Examined at All Ages	GIRLS											
	Entrants			Age 9			Age 13			Age 16		
	Number Examined	Average Age	Height (Inches)	Weight (Pounds)	Number Examined	Average Age	Height (Inches)	Weight (Pounds)	Number Examined	Average Age	Height (Inches)	Weight (Pounds)
1953-59	1313	5 7	43-0	42-0	1206	9 4	51-6	63-0	981	13 3	59-9	99-4
1957-58	1361	5 7	43-1	42-5	1325	9 2	51-0	59-9	1151	13 4	59-9	101-9
1956-57	1386	5 7	43-3	41-2	1448	9 6	53-4	63-6	1079	13 6	59-9	100-4
1955-56	1362	5 8	43-3	40-9	1318	9 6	51-5	62-5	991	13 6	60-0	98-5
1954-55	1436	5 7	46-2	41-9	1131	9 6	52-0	63-0	1077	13 6	60-0	97-6
1953-54	1370	5 7	44-2	42-3	1320	9 6	51-9	62-9	1041	13 5	59-9	97-3
1952-53	1282	5 6	42-8	41-2	1182	9 6	51-5	61-5	922	13 5	59-6	96-4
1951-52	1352	5 6	43-0	41-5	1098	9 7	51-6	60-6	1022	13 6	59-9	95-7
1950-51	1157	5 7	42-9	41-5	1052	9 6	51-1	59-6	1138	13 5	59-9	92-9
County Average— Years 1940-41 to 1949-50	11249	5 2	42-4	41-9	10287	8 11	49-4	55-6	9957	13 4	59-3	93-5
County Average— Years 1930-31 to 1939-40	12132	5 7	42-3	40-5	11645	8 8	49-0	54-8	*7123	13 5	59-5	94-8
County Average— Years 1919-20 to 1929-30	13019	5 8	41-7	39-7	11582	8 8	48-2	52-3	—	—	—	—
									774	16 1	62-2	111-6

* Previous to the session 1930-31, the average age of the Third Age Group was 12 years. The number of children examined at the average age of 13 years is, therefore, comparatively small.

TABLE VIII.
PREVIOUS ILLNESSES

	No. of Routine Cases Examined	Measles		Whooping Cough		Chicken Pox		Mumps		Scarlet Fever		Diphtheria		Smallpox		Rheuma- tism		Fits		Others	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Entrants ...	2663	1963	73.7	578	21.7	871	33.4	744	27.9	84	3.1	-	-	-	-	-	-	-	-	1013	38.0
Second Age- Group ...	2651	2349	92.08	1133	44.4	1642	64.3	1232	48.2	199	7.8	2	0.07	-	-	10	0.39	-	-	1281	50.2
Third Age- Group ...	2027	1898	93.63	1338	66.0	1372	67.6	1048	51.7	209	10.3	6	0.29	-	-	18	0.64	-	-	1111	54.81
Fourth Age- Group ...	291	276	94.8	202	69.4	228	78.3	170	58.4	40	13.7	6	2.06	-	-	2	0.68	-	-	173	59.4
TOTAL ...	7532	6486	80.1	3251	43.1	4113	54.6	3194	42.4	532	7.06	14	0.2	-	-	25	0.3	-	-	3578	47.5

TABLE IX.

VERMINOUS CONDITIONS

The following table summarises on an area basis the number of children showing evidence of verminous conditions of the head, or body, or both.

School Management Area	No. of Routine Cases Examined			No. Showing Evidence of Vermin			Percentage		
	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total
Cumbernauld	131	151	282	9	8	11	2.2	5.2	3.9
Kirkintilloch	623	589	1212	5	35	40	0.8	5.9	3.3
New Kilpatrick	415	362	777	3	2	5	0.7	0.5	0.6
Old Kilpatrick	1321	1219	2540	13	61	74	0.9	5.0	2.9
Dumbarton	838	749	1587	7	55	62	0.8	7.3	3.9
Vale of Leven	307	312	619	7	42	49	2.2	13.4	7.9
Helensburgh	258	257	515	—	—	—	—	—	—
Total	3893	3638	7532	38	203	241	0.9	5.5	3.1

TABLE X.

THROAT, NOSE AND EAR CLINICS

	CLYDE-BANK	KIRKINTILLOCH	DUMBARTON	TOTAL
Number of Children Examined ...	488	129	518	1,135
Number of Children Operated On	226	94	256	576
Children Removed to Hospital following Operation	3	2	3	8
Home Visits for After Care	157	65	258	480
Nature of Operation—				
Excision of Tonsils and Adenoids ...	220	91	244	555
Excision of Tonsils only	—	—	1	1
Excision of Adenoids only	6	3	8	17
Others	—	—	3	3
Conditions Found on Examination—				
Discharging Ears	42	10	32	84
Tonsils Much Enlarged	263	47	220	530
Deafness	24	19	56	99
Obstructed Breathing and Deafness	46	35	36	117
Obstructed Breathing	193	47	145	385
Rhinitis	—	6	188	194
Tonsilitis	108	41	142	291
Enlarged Glands	189	25	190	404
Bronchitis	153	25	60	238
Otorrhoea	—	11	27	38
Tonsils and Adenoids	246	69	207	522
Adenoids	5	50	12	67
Various	230	8	74	312
Awaiting Examination,	129	6	140	275
„ Operation,	69	37	55	161

TABLE XI.
OPHTHALMIC TREATMENT OF SCHOOL CHILDREN (TABLE A)

	Dumbarton		Helensburgh		Kirkintilloch		New Kilpatrick		Old Kilpatrick		Vale of Leven	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
Defective Vision Corrected with Spectacles ...	168	166	16	13	108	118	41	50	195	189	60	67
Defective Vision too Slight to benefit from Spectacles	19	24	9	7	21	16	7	11	20	19	8	11
Defective Vision Treated Otherwise ...	12	15	—	—	8	7	7	4	30	34	—	4
Total Number of Children Examined ...	199	205	25	20	137	141	55	65	245	242	68	82
Re-examinations ...	71	78	4	4	57	63	5	6	89	85	9	17

Total Number of Children Examined—1484.

TABLE XIII.

1951 AGE GROUP — EYE EXAMINATIONS

Slight Visual Defect : 6·9—6·12 Marked Visual Defect : 6·18 or worse
(Snellen's Test at 6 Metres)

	BOYS		GIRLS		TOTAL	
	No.	%	No.	%	No.	%
Total Number of Children Examined	1189	—	1106	—	2295	—
Normal Vision 	1064	89·48	987	89·24	2051	89·36
Slight Defect (Both Eyes) 	39	3·28	49	4·43	88	3·83
Marked Defect (Both Eyes) 	12	1·00	14	1·22	26	1·13
Slight Defect (One Eye) 	55	4·62	41	3·70	96	4·18
Marked Defect (One Eye) 	16	1·34	14	1·22	30	1·30
Unreliable Results 	3	0·25	1	0·09	4	0·17
Number of Children found Wearing Glasses 	44	3·70	33	2·98	77	3·35
Strabismus 	26	2·18	24	2·16	50	2·17
Blepharitis 	2	0·25	2	0·18	5	0·21
Conjunctivitis 	—	—	1	0·09	1	0·09
Corneal Ulcers or Opacities 	—	—	—	—	—	—
Others 	7	0·58	1	0·09	8	0·34

Note.—When a child has defective vision of slight defect and marked defect together, the defect has been classified according to the better eye grouping.

TABLE XIV.

1951 AGE GROUPS—EAR EXAMINATIONS

	Total Number of Children Examined	Normal Hearing		Defective Hearing				Otorrhoea	Otitis Media	Others
				Grade II		Grade III				
		No.	%	No.	%	No.	%			
Boys	1189	1177	98·99	11	0·92	1	0·08	1	1	8
Girls	1106	1101	99·54	5	0·45	—	—	1	—	7
Total	2295	2278	99·25	16	0·69	1	0·04	2	1	15

Grade II.—Children who can hear ordinary conversation voice between 20 feet and 2 feet.

Grade III.—Children who can hear ordinary conversation voice at not more than 2 feet, if at all.

TABLE XV.
ORTHOPTIC REPORT
 (1st July, 1958 to 30th June, 1959)

	Dumbarton	Kirkintilloch	Clydebank	Total
Number of Patients Referred	152	111	169	432
No. of Patients on Treatment	107	63	95	265
No. of Patients on Observation—				
Before Treatment	13	21	31	65
After Treatment	19	19	30	68
Referred for Operation—				
Before Treatment	—	—	—	—
After Treatment	6	8	7	21
Treatment not Required	6	—	1	7
Refused Treatment	—	—	1	1
Unsuitable for Treatment	—	—	—	—
Failed to attend Examination	1	—	4	5
Total	152	111	169	432
Response to Treatment				
Good	25	6	11	42
Improved	68	47	64	179
No Improvement	6	2	7	15
Ceased to Attend	8	8	13	29
Total	107	63	95	265

TABLE XVI.
TREATMENT OF MINOR AILMENTS

District	Total No. of Children dealt with	Total No. of Attendances	No. of Visits to Parents	No. of Visits to Schools	Cuts, Bruises, Sprains and Minor Injuries, etc.	Diseases of the Ear	Diseases of the Eye (excluding D.V.)	Ringworm of the Scalp	X-ray Treatment	Other Treatment	Ringworm of the Body	Scabies	Impetigo	Other Diseases
Cumbernauld	46	68	84	30	40	4	2	—	—	—	—	—	—	—
Kirkintilloch	—	64	63	3	—	—	—	—	—	—	—	—	8	—
Twechar and Croy	1235	994	65	76	616	42	9	—	—	5	3	20	114	23
New Kilpatrick	—	—	14	—	—	—	—	—	—	—	—	—	—	—
Milngavie	248	502	24	37	199	31	30	—	—	—	—	—	50	—
Old Kilpatrick and Milton	43	60	26	12	15	1	—	—	—	—	—	—	—	—
Duntocher	276	410	132	28	179	8	7	—	—	—	—	3	24	24
Clydebank	4884	256	519	74	556	211	59	—	—	786	—	11	158	607
Dumbarton	479	278	518	169	238	93	27	—	—	11	—	9	127	84
Renton	—	—	—	6	76	—	2	—	—	—	—	—	—	1
Vale of Leven	95	264	72	—	48	24	20	—	—	13	—	14	13	78
Helensburgh	400	75	24	—	7	3	—	—	—	—	—	—	2	38
All other Western Portions of the County	67	—	8	1	2	—	1	—	—	—	—	—	26	1
Total	7773	2001	1540	436	1076	417	157	—	—	816	3	57	622	856

TABLE XVII.
REPORT BY SCHOOL NURSES

District	No. of Children Examined for first time	No. of Children Re-examined	Total No. of Children Examined	CAUSES OF REFERENCE						No. of Visits Paid to Schools	No. of Visits Paid to Homes
				Vermis- on Head	Vermis- on Nits Body	Vermis- Sus- pected	Unsatis- factory Cloth- ing	Unsatis- factory Foot- wear	Others		
Cumbernauld	307	235	542	31	—	—	1	—	—	9	6
Kirkintilloch	2608	1704	4312	377	32	60	6	5	27	86	539
Twechar and Croy	606	450	1056	161	—	34	2	2	9	20	36
New Kilpatrick	150	2	152	3	—	—	—	—	56	8	—
Milngavie	403	1016	1419	91	—	7	—	—	50	64	56
Duntocher	89	467	556	68	—	9	17	4	12	27	50
Old Kilpatrick and Milton	410	788	1198	76	2	2	14	11	17	35	4
Clydebank	3835	4988	8823	2990	17	—	80	11	—	284	236
Dumbarton	5034	6741	11775	6616	2	236	18	15	305	144	104
Renton	573	—	573	10	—	—	1	—	—	2	—
Vale of Leven	4309	493	4802	281	—	2	11	—	52	55	22
Helensburgh	755	398	1153	127	4	—	4	—	2	34	15
All other Western Portions of the County	294	3225	3519	58	—	1	1	2	2	82	51
Total	19373	20507	39880	10889	57	351	155	50	532	850	1119

TABLE XVIII.
RESULTS OF AUDIOMETRIC SURVEY

Age-Groups Children Examined	No. Listed	No. Tested	No. Normal Hearing	No. Defective Hearing	Grade				Case referred for					
					1	11a	11b	111	S.M.O.	E.N.T. Examination	Special Seating	Hearing Aid	Medical Treatment	No Action
1953	2002	1941	1894	47	34	10	3	—	47	24	18	1	23	—
1949	3400	2624	2550	74	48	23	2	1	74	44	29	4	20	10
Children born outwith Age-Groups	219	196	151	45	23	16	6	—	45	28	25	7	10	7

TABLE XIX.
SPEECH THERAPY.
SUMMARY OF STATISTICS, 1958-1959.

CLINIC or SCHOOL	No. on Roll	Left	Discharged		Transferred		Admitted	No. on Roll
			Cured	Non-Co-op	In	Out		
Bank Street	20	—	7	—	2	6	12	21
Bearsden Primary	3	—	12	—	6	1	16	12
Academy	—	—	5	—	6	—	4	5
Bonhill	9	1	4	1	—	—	3	6
Cardross	6	—	4	—	—	—	4	6
Clyde Street	10	1	5	—	—	—	1	5
Clydebank H.	—	—	—	—	—	—	—	—
Condorrat	5	—	3	—	—	—	5	7
Croy	10	—	5	—	—	—	5	10
Cumhernauld	12	1	—	9	1	—	5	8
Dalmuir	—	—	—	—	—	—	1	1
Dalreoch	33	3	13	1	1	3	9	23
Elgin Street	20	1	7	1	1	3	6	15
Fairley	2	—	—	—	—	—	—	2
Gavinhorn	13	—	2	—	2	1	—	12
Goldenhill	10	—	6	—	—	—	5	9
Hartfield	12	1	7	2	2	1	9	12
Hermitage	7	1	4	—	—	—	4	6
Hillfoot	5	1	1	—	1	4	9	9
Hillhead	14	—	13	—	1	2	11	11
Jamestown	11	1	5	—	6	1	12	22
Kilhowie	13	1	3	—	3	—	2	14
Knoxland	—	—	—	—	—	—	1	1
Lairdsland	14	1	11	—	2	3	9	10
Lenzie	5	1	6	1	2	—	8	7
Levenvale	8	—	5	2	—	—	3	4
Linnvale	24	—	12	1	2	1	8	20
Milton	—	—	—	—	—	—	—	—
Milngavie	15	2	7	—	—	4	12	14
Moss Cottage	2	—	—	—	—	—	8	10
Miller St.	1	—	—	—	—	1	—	—
Our Holy Redeemer's	2	—	6	—	6	2	1	1
Renton Public	—	—	—	—	—	—	—	—
St. Eunan's	19	2	7	—	—	5	7	12
St. Joseph's	16	—	4	—	—	—	—	12
St. Joseph's (Milngavie)	5	2	—	—	—	1	5	7
St. Mary's (Duntocher)	10	1	5	—	3	2	4	9
St. Martin's	—	—	—	—	—	—	—	—
St. Ninian's	26	—	15	—	2	5	1	9
St. Patrick's Elementary	13	—	7	—	—	2	6	11
St. Stephen's	14	1	4	1	1	1	7	14
Townhead	16	1	5	1	1	2	6	14
Twechar	8	—	3	—	—	—	3	8
Westerton	6	—	3	—	1	4	2	2
Whitecrook	12	—	7	1	1	—	7	12
Total	431	23	213	21	53	55	221	393

TABLE XX.—ORTHOPAEDIC TREATMENT

Clinic	Response To treatment	DEFECTS OR DISEASE																								Mouth Breathers	Rheum- atism	Others	Total					
		Kyphosis			Lordosis			Kypho- lordosis			Scoliosis			Chest			Feet Deform- ities			Paralysis Inertile Tendons			Asthma							Bron- chitis				
		Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total					Boys	Girls	Total		
Dumbarrow ...	Treatment Completed ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	On Treatment ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Unsatisfactory due to— (a) Non-attendance ... (b) Non-co-operative ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Vale of Leven at Dumbarrow ...	Treatment Completed ...	3	3	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	On Treatment ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Unsatisfactory due to— (a) Non-attendance ... (b) Non-co-operative ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Hillfoot ...	Treatment Completed ...	13	5	18	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	On Treatment ...	2	1	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Unsatisfactory due to— (a) Non-attendance ... (b) Non-co-operative ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Milngavie ...	Treatment Completed ...	4	2	6	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	On Treatment ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Unsatisfactory due to— (a) Non-attendance ... (b) Non-co-operative ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Helsburgh ...	Treatment Completed ...	—	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	On Treatment ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Unsatisfactory due to— (a) Non-attendance ... (b) Non-co-operative ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Dumbarrow Physically Handicapped ...	Treatment Completed ...	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	On Treatment ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Unsatisfactory due to— (a) Non-attendance ... (b) Non-co-operative ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Old Kilpatrick ...	Treatment Completed ...	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	On Treatment ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Unsatisfactory due to— (a) Non-attendance ... (b) Non-co-operative ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Clydebank ...	Treatment Completed ...	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	On Treatment ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Unsatisfactory due to— (a) Non-attendance ... (b) Non-co-operative ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Kirkintilloch ...	Treatment Completed ...	6	6	12	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	On Treatment ...	2	2	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Unsatisfactory due to— (a) Non-attendance ... (b) Non-co-operative ...	3	1	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Croy ...	Treatment Completed ...	1	2	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	On Treatment ...	2	1	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Unsatisfactory due to— (a) Non-attendance ... (b) Non-co-operative ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Cumbernauld ...	Treatment Completed ...	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	On Treatment ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Unsatisfactory due to— (a) Non-attendance ... (b) Non-co-operative ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Milton ...	Treatment Completed ...	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	On Treatment ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Unsatisfactory due to— (a) Non-attendance ... (b) Non-co-operative ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	

(a) Non-attendance.

(b) Non-co-operative

NUMBER OF TREATMENTS GIVEN

Clydebank (including Vale of Leven)	1669	Helsburgh ...	465
Dumbarrow	2059	Kirkintilloch	1038
Kirkintilloch	1826	Dumbarrow Physically Handicapped	189
Old Kilpatrick	425	Croy	579
Old Kilpatrick	249	Cumbernauld	362
Milton (Opened 5/12/56)

Total ... 465



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